



TRANSMITTAL FORM

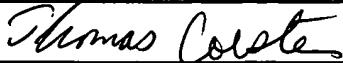
(to be used for all correspondence after initial filing)

| | | | |
|--|----|------------------------|---------------|
| | | Application No. | 10/607,158 |
| | | Filing Date | June 25, 2003 |
| | | First Named Inventor | Koichi Yamada |
| | | Art Unit | 2113 |
| | | Examiner Name | Amine Riad |
| Total Number of Pages in This Submission | 14 | Attorney Docket Number | 42P15793 |

ENCLOSURES (check all that apply)

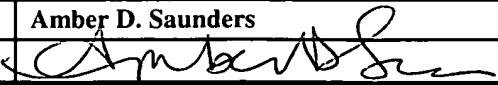
| | | |
|---|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached | <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers | <input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
| <input checked="" type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) | <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) <input type="checkbox"/> Landscape Table on CD | Remarks <div style="border: 1px solid black; height: 40px; width: 100%;"></div> |
| <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---|
| Firm or Individual name | Thomas M. Coester, Reg. No. 39,637 BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP |
| Signature |  |
| Date | June 15, 2006 |

CERTIFICATE OF MAILING/TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

| | |
|-----------------------|---|
| Typed or printed name | Amber D. Saunders |
| Signature |  |
| | Date |
| | June 15, 2006 |

Based on PTO/SB/21 (09-04) as modified by Blakely, Sokoloff, Taylor & Zafman (wfr) 11/30/2005.
SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450



FEE TRANSMITTAL for FY 2005

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT **(\$)** **0.00**

| Complete if Known | |
|----------------------|---------------|
| Application Number | 10/607,158 |
| Filing Date | June 25, 2003 |
| First Named Inventor | Koichi Yamada |
| Examiner Name | Amine Riad |
| Art Unit | 2113 |
| Attorney Docket No. | 42P15793 |

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order None Other (please identify): _____

Deposit Account Deposit Account Number: 02-2666 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
 Charge any additional fee(s) or underpayment of fee(s) Credit any overpayments
 under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20.

FEE CALCULATION

1. EXTRA CLAIM FEES

| | | Extra Claims | Fee from below | Fee Paid |
|--------------------|----|-----------------|-------------------|----------|
| Total Claims | 26 | 26* = | 0 | \$0.00 |
| Independent Claims | 4 | 4* = | 0 | \$0.00 |
| Multiple Dependent | | | | |

| Large Entity | | Small Entity | | Fee Description |
|--------------|----------|--------------|----------|---|
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | |
| 1202 | 50 | 2202 | 25 | Claims in excess of 20 |
| 1201 | 200 | 2201 | 100 | Independent claims in excess of 3 |
| 1203 | 360 | 2203 | 180 | Multiple Dependent claim, if not paid |
| 1204 | 790 | 2204 | 395 | **Reissue independent claims over original patent |
| 1205 | 300 | 2205 | 150 | **Reissue claims in excess of 20 and over original patent |
| SUBTOTAL (1) | | (\$) | 0.00 | |

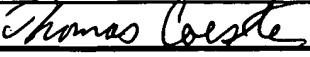
**or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity Small Entity

| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|---------------------|----------|--------------|----------|--|----------|
| 1051 | 130 | 2051 | 65 | Surcharge - late filing fee or oath | |
| 1052 | 50 | 2052 | 25 | Surcharge - late provisional filing fee or cover sheet. | |
| 2053 | 130 | 2053 | 130 | Non-English specification | |
| 1251 | 120 | 2251 | 60 | Extension for reply within first month | |
| 1252 | 450 | 2252 | 225 | Extension for reply within second month | |
| 1253 | 1,020 | 2253 | 510 | Extension for reply within third month | |
| 1254 | 1,590 | 2254 | 795 | Extension for reply within fourth month | |
| 1255 | 2,160 | 2255 | 1,080 | Extension for reply within fifth month | |
| 1401 | 500 | 2401 | 250 | Notice of Appeal | |
| 1402 | 500 | 2402 | 250 | Filing a brief in support of an appeal | |
| 1403 | 1,000 | 2403 | 500 | Request for oral hearing | |
| 1451 | 1,510 | 2451 | 1,510 | Petition to institute a public use proceeding | |
| 1460 | 130 | 2460 | 130 | Petitions to the Commissioner | |
| 1807 | 50 | 1807 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 1806 | 180 | 1806 | 180 | Submission of Information Disclosure Stmt | |
| 1809 | 790 | 1809 | 395 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 1810 | 790 | 2810 | 395 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| Other fee (specify) | | SUBTOTAL (2) | | (\$) | |

SUBMITTED BY

| | | | | | |
|-------------------|---|--------------------------------------|--------|-----------|----------------|
| Name (Print/Type) | Thomas M. Coester | Registration No. (Attorney/Agent) | 39,637 | Telephone | (408) 720-8300 |
| Signature |  | | | Date | 06/15/06 |



PATENT
Attorney Docket No. 042390.P15793

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

Koichi Yamada

Application No.: 10/607,158

Filed: June 25, 2003

For: **IDENTIFYING AFFECTED PROGRAM
THREADS AND ENABLING ERROR
CONTAINMENT AND RECOVERY**

Examiner: Amine Riad

Art Unit: 2113

Confirmation No.: 5608

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450

Dear Sir:

AMENDMENT AND RESPONSE TO OFFICE ACTION

In response to the Office Action mailed March 20, 2006, in connection with the above referenced patent application, Applicants respectfully request entry of the following amendments and request reconsideration in view of the following remarks.